

County: Waupaca  
 PINE MANOR HEALTH CARE CENTER  
 1625 EAST MAIN STREET  
 CLINTONVILLE 54929 Phone: (715) 823-3135  
 Operated from 1/1 To 12/31 Days of Operation: 365  
 Operate in Conjunction with Hospital? No  
 Number of Beds Set Up and Staffed (12/31/02): 76  
 Total Licensed Bed Capacity (12/31/02): 80  
 Number of Residents on 12/31/02: 66

Facility ID: 7210

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Ownership: Corporation  
 Highest Level License: Skilled  
 Operate in Conjunction with CBRF? No  
 Title 18 (Medicare) Certified? Yes  
 Title 19 (Medicaid) Certified? Yes  
 Average Daily Census: 71

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/02)				Length of Stay (12/31/02)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		33.3
Supp. Home Care-Personal Care	No	-----		-----		1 - 4 Years		48.5
Supp. Home Care-Household Services	No	Developmental Disabilities	3.0	Under 65	10.6	More Than 4 Years		18.2
Day Services	No	Mental Illness (Org./Psy)	57.6	65 - 74	7.6			-----
Respite Care	Yes	Mental Illness (Other)	12.1	75 - 84	33.3			100.0
Adult Day Care	Yes	Alcohol & Other Drug Abuse	0.0	85 - 94	43.9	*****		
Adult Day Health Care	Yes	Para-, Quadra-, Hemiplegic	1.5	95 & Over	4.5	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	4.5		100.0	(12/31/02)		
Other Meals	No	Cardiovascular	9.1	65 & Over	89.4	-----		
Transportation	No	Cerebrovascular	6.1		-----	RNs		5.6
Referral Service	No	Diabetes	0.0	Sex	%	LPNs		6.1
Other Services	No	Respiratory	1.5	-----		Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	4.5	Male	37.9	Aides, & Orderlies		
Mentally Ill	No		-----	Female	62.1			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	Yes				100.0			

Method of Reimbursement

Level of Care	Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care			Total Resi- dents	% Of All
	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)		
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	4	100.0	328	44	91.7	91	0	0.0	0	14	100.0	132	0	0.0	0	0	0.0	0	62	93.9
Intermediate	---	---	---	4	8.3	77	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	4	6.1
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	4	100.0		48	100.0		0	0.0		14	100.0		0	0.0		0	0.0		66	100.0

Admissions, Discharges, and Deaths During Reporting Period						Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02			
						-----			
Percent Admissions from:						Activities of		% Needing Assistance of	Total
						Daily Living (ADL)		One Or Two Staff	Number of Residents
								% Totally Dependent	
Private Home/No Home Health	15.4						Independent		
Private Home/With Home Health	0.0								
Other Nursing Homes	15.4								
Acute Care Hospitals	69.2								
Psych. Hosp.-MR/DD Facilities	0.0								
Rehabilitation Hospitals	0.0								
Other Locations	0.0								
Total Number of Admissions	52								
Percent Discharges To:						Continence		% Special Treatments	%
Private Home/No Home Health	20.7					Indwelling Or External Catheter			
Private Home/With Home Health	0.0					Occ/Freq. Incontinent of Bladder			
Other Nursing Homes	10.3					Occ/Freq. Incontinent of Bowel			
Acute Care Hospitals	3.4					Mobility			
Psych. Hosp.-MR/DD Facilities	3.4					Physically Restrained			
Rehabilitation Hospitals	0.0								
Other Locations	3.4					Skin Care			
Deaths	58.6					With Pressure Sores			
Total Number of Discharges						With Rashes			
(Including Deaths)	58								
								Other Resident Characteristics	
								Have Advance Directives	
								Medications	
								Receiving Psychoactive Drugs	

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Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

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		This Facility	Ownership: Proprietary	Bed Size: 50-99	Licensure: Skilled	All Facilities			
		%	Peer Group Ratio	Peer Group Ratio	Peer Group Ratio	% Ratio	% Ratio	% Ratio	% Ratio
Occupancy Rate: Average Daily Census/Licensed Beds		88.2	85.1 1.04	88.5 1.00	86.7 1.02	85.1 1.04			
Current Residents from In-County		59.1	75.4 0.78	72.5 0.82	69.3 0.85	76.6 0.77			
Admissions from In-County, Still Residing		21.2	20.1 1.05	19.5 1.09	22.5 0.94	20.3 1.04			
Admissions/Average Daily Census		73.2	138.3 0.53	125.4 0.58	102.9 0.71	133.4 0.55			
Discharges/Average Daily Census		81.7	139.7 0.58	127.2 0.64	105.2 0.78	135.3 0.60			
Discharges To Private Residence/Average Daily Census		16.9	57.6 0.29	50.7 0.33	40.9 0.41	56.6 0.30			
Residents Receiving Skilled Care		93.9	94.3 1.00	92.9 1.01	91.6 1.02	86.3 1.09			
Residents Aged 65 and Older		89.4	95.0 0.94	94.8 0.94	93.6 0.96	87.7 1.02			
Title 19 (Medicaid) Funded Residents		72.7	64.9 1.12	66.8 1.09	69.0 1.05	67.5 1.08			
Private Pay Funded Residents		21.2	20.4 1.04	22.7 0.94	21.2 1.00	21.0 1.01			
Developmentally Disabled Residents		3.0	0.8 3.83	0.6 4.89	0.6 5.35	7.1 0.43			
Mentally Ill Residents		69.7	30.3 2.30	36.5 1.91	37.8 1.84	33.3 2.09			
General Medical Service Residents		4.5	23.6 0.19	21.6 0.21	22.3 0.20	20.5 0.22			
Impaired ADL (Mean)		59.4	48.6 1.22	48.0 1.24	47.5 1.25	49.3 1.21			
Psychological Problems		63.6	55.2 1.15	59.4 1.07	56.9 1.12	54.0 1.18			
Nursing Care Required (Mean)		6.6	6.6 1.00	6.3 1.06	6.8 0.97	7.2 0.92			